PAGE 1 / 4

lmage# 202305309581690426

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	CHAVEZ-DEREMER, LORI, ,						
	(b) Address (number and street) 13203 SE 172ND AVE STE 166 #399	□Ch	eck if addres	s changed		Candidate's FEC Identification Number H2OR05209	
	(c) City, State, and ZIP Code					3. Is This New Amended	_
	HAPPY VALLEY		OR	9708	6	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sough	t		6. State & Distr	rict of Candidate	_
	REPUBLICAN PARTY	House			OR	05	
	DE	SIGNATION	OF PRI	NCIPAL	CAMPAIGN	COMMITTEE	_
7.	I hereby designate the following nar	med political com	nmittee as m	y Principal (Campaign Comm	nittee for the $\frac{2024}{\text{(year of election)}}$ election(s).	
	NOTE: This designation should be f	iled with the app	ropriate offic	e listed in t	ne instructions.		_
	(a) Name of Committee (in full) LORI CHAVEZ-DEF	REMER FO	OR CON	GRESS	8		
	(b) Address (number and street) 13203 SE 172ND AVE						_
	STE 166 #399						
	(c) City, State, and ZIP Code						_
	HAPPY VALLEY				OR	97086	
	DE				THORIZED g Representative	COMMITTEES es)	
8.	I hereby authorize the following name candidacy.	ned committee, v	vhich is NOT	my princip	al campaign com	nmittee, to receive and expend funds on behalf of my	
	NOTE: This designation should be f	iled with the prin	cipal campai	gn committ	ee.		
	(a) Name of Committee (in full) TAKE BACK THE H	IOUSE 202	22				_
	(b) Address (number and street) PO BOX 30844						_
	(c) City, State, and ZIP Code						_
	BETHESDA				MD	20824	
	I certify that I have exa	mined this State	ment and to	the best of	my knowledge a	nd belief it is true, correct and complete.	_
Si	gnature of Candidate					Date	-
C	HAVEZ-DEREMER, LORI, , ,			[Elec	tronically Filed]	05/30/2023	
N	OTE: Submission of false, erroneous,	, or incomplete in	nformation m	ay subject t	he person signin	ng this Statement to penalties of 2 U.S.C. §437g.	_
							_
		1					

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	² of	4	
Page	- 01		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full) NORTHWEST PRINCIPLES JFC						
	(b) Address (number and street) 228 S WASHINGTON ST STE 115						
	(c) City, State, and ZIP Code ALEXANDRIA	VA	22314				
3.	I hereby authorize the following named committee, which is NC candidacy. NOTE : This designation should be filed with the pri		·	ınds on behalf of my			
	(a) Name of Committee (in full) SCOTT FRANKLIN WINGMAN FUND						
	(b) Address (number and street) P.O. BOX 2811						
	(c) City, State, and ZIP Code LAKELAND	FL	33806				
3.	I hereby authorize the following named committee, which is NC candidacy. NOTE : This designation should be filed with the pri			ınds on behalf of my			
	(a) Name of Committee (in full) LORI CHAVEZ-DEREMER VICTORY						
	(b) Address (number and street) 13203 SE 172ND AVE STE 166 #399						
	(c) City, State, and ZIP Code						
	HAPPY VALLEY	OR	97086				
3.	I hereby authorize the following named committee, which is NC candidacy. NOTE : This designation should be filed with the pri		· · · · · · · · · · · · · · · · · · ·	inds on behalf of my			
	(a) Name of Committee (in full) CHAVEZ-DEREMER FOR OR-05						
	(b) Address (number and street) PO BOX 30844						
	(c) City, State, and ZIP Code						

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

_	3 - 4	
Page	³ of ⁴	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full) PROTECT THE HOUSE 2024						
	(b) Address (number and street) PO BOX 30844			_			
	(c) City, State, and ZIP Code BETHESDA	MD	20824				
3.	I hereby authorize the following named committee, which is NOT my candidacy. NOTE : This designation should be filed with the principal		•				
	(a) Name of Committee (in full) FRESHMAN AGRICULTURAL REPUBLIC	AN MEMBER	RS TRUST AKA FARM TRUST				
	(b) Address (number and street) PO BOX 30844			•			
	(c) City, State, and ZIP Code BETHESDA	MD	20824				
3.	I hereby authorize the following named committee, which is NOT my candidacy. NOTE : This designation should be filed with the principal						
3.		campaign committee					
3.	candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) HISPANIC LEADERSHIP TRUST PARTNE (b) Address (number and street) 1005 CONGRESS AVE	campaign committee					
3.	candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) HISPANIC LEADERSHIP TRUST PARTNE (b) Address (number and street)	campaign committee		-			
3.	candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) HISPANIC LEADERSHIP TRUST PARTNE (b) Address (number and street) 1005 CONGRESS AVE STE 400	campaign committee		-			
	candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) HISPANIC LEADERSHIP TRUST PARTNE (b) Address (number and street) 1005 CONGRESS AVE STE 400 (c) City, State, and ZIP Code	Campaign committee RSHIP TX principal campaign	78701 committee, to receive and expend funds on behalf of my				
	candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) HISPANIC LEADERSHIP TRUST PARTNE (b) Address (number and street) 1005 CONGRESS AVE STE 400 (c) City, State, and ZIP Code AUSTIN I hereby authorize the following named committee, which is NOT my candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) TRANSPORTATION TRUST FUND	Campaign committee RSHIP TX principal campaign	78701 committee, to receive and expend funds on behalf of my				
	candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) HISPANIC LEADERSHIP TRUST PARTNE (b) Address (number and street) 1005 CONGRESS AVE STE 400 (c) City, State, and ZIP Code AUSTIN I hereby authorize the following named committee, which is NOT my candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full)	Campaign committee RSHIP TX principal campaign	78701 committee, to receive and expend funds on behalf of my				
	candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) HISPANIC LEADERSHIP TRUST PARTNE (b) Address (number and street) 1005 CONGRESS AVE STE 400 (c) City, State, and ZIP Code AUSTIN I hereby authorize the following named committee, which is NOT my candidacy. NOTE: This designation should be filed with the principal (a) Name of Committee (in full) TRANSPORTATION TRUST FUND (b) Address (number and street)	Campaign committee RSHIP TX principal campaign	78701 committee, to receive and expend funds on behalf of my				

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	4 of 4	
i age	01	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	PFRIENDS OF PFLUGER					
	(b) Address (number and street) PO BOX 30844					
	(c) City, State, and ZIP Code					
	BETHESDA	MD	20824			
8.	I hereby authorize the following named committee, which is NOT my p candidacy. NOTE : This designation should be filed with the principal committee.			nd funds on behalf of my		
	(a) Name of Committee (in full) GOP WINNING WOMEN 2024					
	(b) Address (number and street) 228 S WASHINGTON ST STE 115					
	(c) City, State, and ZIP Code					
	ALEXANDRIA	VA	22314			
8.	I hereby authorize the following named committee, which is NOT my p candidacy. NOTE: This designation should be filed with the principal candidacy. Name of Committee (in full) (b) Address (number and street)			nd funds on behalf of my		
	(c) City, State, and ZIP Code					
	(c) City, State, and Zir Code					
8.	I hereby authorize the following named committee, which is NOT my p candidacy. NOTE : This designation should be filed with the principal committee.			nd funds on behalf of my		
	(a) Name of Committee (in full)					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					